

County of San Bernardino – Food Stamp Negative Processes and Tools

Introduction

The Food and Nutrition Service (FNS) conducted a National Payment Accuracy Workgroup review regarding Negative actions in San Bernardino County on 12/3/2009. At the request of the FAAC group the items discussed during the NPAWG review along with our negative processes and tools are being shared in an attempt to reduce the Food Stamp (FS) Negative error rate for the State of California as a whole.

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Food Stamp Negative Review- 12/3/09

Introduction

The Food and Nutrition Service (FNS) interviewed staff from PERC, PDD, PID, and TAD to discuss our County's business practices related to Food Stamp Negative Actions. Interviews were conducted on 12/3/09. The following provides notes from the Exit Meeting.

Exit Meeting Attendees

Exit Meeting attendees included:

- 4 representatives from FNS
- Virginia Lugo, PID Chief
- Patrice Thomas, CAC

Review Background

FNS identified that a Payment Accuracy Workgroup has been formed to review business practices for States that have high Negative Error Rates. California was one of the States selected for review. Within California, Los Angeles County and San Bernardino County was selected to participate based on the size of our population.

**Information
Shared**

FNS shared a few examples of issues, identified in other States/Counties that may contribute to invalid denials. *Specific information was not identified for our County.*

Florida

- Florida has a centralized scanning unit for imaging documents. Imaging within this unit became severely backlogged. Staff were denying cases for failure to provide when the missing verif was within the unit.
- Intake applications are received via the Internet. Customers were not given a specific appointment time for the worker to call and verify information. They were told to call a central telephone number during a certain timeframe. During that timeframe the line was often busy and customers could not get through.

Los Angeles County

- During New Employee Training (O&I) inconsistencies were discovered in how various trainers taught procedures regarding "30th Day Denials". This caused inconsistencies in how employees understood and applied the information.

Best Practices were also shared:

Los Angeles County

- Prior to every O&I class the training department conducts a Mock Training for current, selected line staff, supervisors and managers. They review material as it is being presented to ensure the curriculum is "up-to-par". Mock Training is conducted 2 weeks prior to scheduled O&I sessions.

One State in the Mid-West has a pop-up within their computer system that asks the EW if they really want to deny a case prior to the 30th day. Another State has a hard edit that does not allow staff to deny cases, prior to the 30th day, without supervisor approval.

**Suggestions
for our County**

FNS made a few up-front suggestions regarding processes identified during interviews:

Journal Templates

Copies of our journal templates were provided. FNS liked the idea that our templates provided a place to write in case specific information. It was suggested that we make use of the templates mandatory. We explained that use of the template's content is mandatory. The template format is not mandatory. They were agreeable to that but didn't understand why an EW would not want to use the format, as it seems very user-friendly.

Sharing Best Practices/Policy Information

Suggestion to gather Negative Action "Best Practices" from other Counties within the State. *We are currently doing this through the FAAC Group.*

It was also suggested that we review policy information via websites of other States. Many times you are able to gather useful information without having to contact or set up a meeting with the other State.

To increase the awareness of the effect denials have on FS HH participation, one of our interview participants shared a great idea:

QC Board

Add a section that says "We helped XX amount of families eat tonight...or this week....or this month". You would simply enter the number of application approvals for the day, week, or month.

FNS was impressed that our staff are aware of the importance of increasing FS participation. We discussed the fact that Increasing FS HH Participation is one of our Department's Business Goals.

Next Steps

FNS will put together a document detailing information gathered for all States who participated in the Negative Review. A summary of information gathered from our County will be specifically identified. The document will be sent to CA State Representatives in Sacramento for dissemination to the Counties. No timeframe was given for receipt.

Negative Focus Reviews

Overview

Negative Focus Reviews Process Overview

- Effective August 2006, three (3) negative reviews per EW/ES each month will be completed.
- CW/FS and MC negative reviews are to be completed by EWIIIIs during the last full week of the month. Supervisors may help conduct reviews, but Negative Reviews are designated as an EWIII task.
- FC and CC negative reviews will be conducted by EWSIs or EWIIIs.
- Sanction reviews will be conducted by SESSIs.
- Negative cases for review will be selected from ad hoc reports posted to the C-IV Resource Center.
- The reviews will be conducted using C-IV and imaged information. The case will be requested from closed files if needed to complete the review.

Review Instructions

1. Negative review sheets are located on the designated shared server for each district.
 - Region 1 - \\Hssserver034\CAF\Region 1
 - Region 2 - \\Hssserver036\CASRegion2\Tier Focus Reviews
 - Region 3 - \\Hssserver037\CRC\Region 3
 - Region 4 - \\Hssserver035\OfficeStats\Region 4
 - Region 5 - \\Hssserver035\TierI50\Region 5
 - Region 6 - \\Hssserver034\sanctionreviews
2. Open the negative review sheet for each specific worker to complete the review.
3. Select cases for review from ad hoc report. Use the "Denial" ad hoc report for intake denials, the "Discontinuance" report for continuing discontinued reviews, or the "Sanction" report for sanction reviews.
4. Enter information in the yellow highlighted sections on the "worker monthly total" worksheet: worker name, file number, supervisor.
5. Complete one review sheet per review. Enter the yellow highlighted section on the review sheet: case name, case number, denial/disc date, reviewer name.
6. The first question is a "show-stopper". If answered "no", end the review.
7. Answer all review questions, annotating in comments the information to support a "no" response.
8. When a question is answered "no", the correction due date will automatically populate allowing 10-days for correction.
9. Reviews should be limited to the scope of the questions. If a note is cited, check the "note" box to the left of the comments field to establish a due date for correction.
10. Print 1-copy for the EW/ES, 1-copy for the supervisor and 1-copy for the CAS.
11. Supervisors will control for case corrections.

Analysis

CAS group will provide a monthly error trend analysis with corrective action recommendations.

Individual and district review findings should be discussed and appropriate corrective action developed at district corrective action meetings.

CW/FS - Denial/Discontinuance Focus Review

Worker Name	0	Review Date	
File Number:	0	Sup Name:	0
Case Name:		Case Number:	
Denial/Disc Date:		Reviewer Name:	

Question #	Question	Y	N	NA
1	Was the denial/discontinuance a valid action? (i.e. Denial or disc reason was appropriate - over resources, over income, failure to provide, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	Was the appropriate Notice of Action sent and was the correct information included?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	Was the denial/discontinuance action taken timely? (i.e. Food Stamps denied timely on or after the 30th day. Case discontinued timely. FSET program deregistered.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	Did the journal entry substantiate the action taken?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	Was the case routed to the appropriate Medi-Cal worker?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6	If eligible, was the case transferred to TFS?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7	Were all MEDS alerts cleared?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments Note? <input type="checkbox"/>	
--	--

Correction Due:

Completed? ☐

	EW initials	EWS I initials
Corrections Made	<div style="border: 1px solid black; width: 150px; height: 20px;"></div>	<div style="border: 1px solid black; width: 150px; height: 20px;"></div>
Date	<div style="border: 1px solid black; width: 150px; height: 20px;"></div>	<div style="border: 1px solid black; width: 150px; height: 20px;"></div>

Food Stamps Negative Review Tool

Introduction

Negative reviews are required by the Federal FNS program to ensure the States are within tolerance level. To assist the County reviewers, this guideline directs the focus to match Federal review requirements to ensure consistency. This guideline is not to be used in place of the Food Stamp Policy Handbook. Each month the Negative review listing is posted in the C-IV Resource Center for the previous month. Example: The list posted in October is for September discontinuances/denials.

Note: Never review an action that has a future date for discontinuance/denial.

ES

Question 1

- Did the worker take the appropriate action to evaluate and issue ES/Advanced benefits within the ES timeframes?
-

Validity

Question 2 and 2a –

- Look at the reason the case was discontinued and evaluate if the information in C-IV, including verifications justify the discontinuance. Also check that the correct procedure was used in C-IV. i.e. Was a negative action done instead of putting all information into C-IV to allow C-IV to discontinue appropriately and send correct NOAs.
 - If your answer to question 2 is “No” – Use drop down box, 2a, to select what information was missing or does not support the reason for the denial/discontinuance.
-

Timely Action

Question 3 –

- Was the Food Stamp application denied timely on or after the 30th day?
 - Was the action taken to discontinue the case taken timely to help eliminate an over issuance?
-

NOMI

Question 4 –

- Did the Eligibility Worker complete all actions required within C-IV to allow the automated NOMI to be sent out via C-IV?
 - Was the Customer Schedule within C-IV used correctly?
-

Food Stamps Negative Review Tool - Continued

TFS

Question 5 –

- Review the CW discontinuance reason. Determine if case should have been transferred to a TFS case. Was it transferred correctly?
-

Additional Comments

- When completing the comment section, list the question number and then the reason that the question was incorrect, unless a drop down box has already been provided for that question.
 - When completing the comment section, stay within the focus of the Negative review.
 - Do not spend extra time on past issuances; concentrate on the food stamp discontinuance/denial for the previous month under review.
 - Do not snowball the errors.
 - If you are listing two numbers in the comment section for the same error, look at which question actually caused the error. Cite the question that was the initial cause of the error only.
-

Negative Focus Reviews

Overview

Negative Focus Reviews Process Overview

- Negative reviews will be completed throughout the month. CW/FS and MC negative reviews will be completed by EW IIIs. EWS Is may assist with reviews, however, Negative Reviews are designated as an EW III task.
 - FC and CC negative reviews will be conducted by EWS Is or EW IIIs.
 - Pre-Sanction reviews will be conducted by SESS Is.
 - Negative cases for review will be selected from ad hoc reports posted to the C-IV Resource Center. *See special instructions below for Pre-Sanction reviews and CW/FS Intake reviews.*
 - The reviews will be conducted using C-IV and imaged information. The case will be requested from closed files if needed to complete the review.
-

Number of Required Reviews

The following number of Negative Case Reviews will be completed for each program, per worker, per month:

- CW/FS (Intake and Continuing)- 5
 - FC- 3
 - CC- 3
 - ES- 3
 - MC- 3
-

ES Pre-Sanction Reviews

SESS Is will review 3 non-compliance cases per ESS. The cases will be reviewed within one day of the proposed sanction action being completed; prior to sending notice to the EW or forwarding to the sanction worker.

CW/FS Intake Reviews

Negative case reviews will be selected from the "FS Apps Denied Less Than 30 Days" and "Denial" Ad Hoc reports in the following priority:

- Cases showing denied within the 20th and 29th day, from the application date, on the "FS Apps Denied Less Than 30 Days" report.
- If there are not five available cases showing on the report, the "Denial" report will be used to review remaining cases up to a total of 5

For example:

Worker AB012 has 7 cases showing on the "FS Apps Denied Less Than 30 Days" report. 2 of the 7 were denied between the 20th and 29th day. The EW III will review both cases. The remaining 3 cases will be selected from the "Denial" report.

**Review
Instructions**

1. Negative review sheets are located on the designated shared server for each district.
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Region 2 - \\hssserver036\CASRegion2\Tier Focus Reviews
Region 3 - \\Hssserver037\CRC\Region 3
Region 4 - \\Hssserver035\OfficeStats\Region 4
Region 5 - \\Hssserver035\Tier150\Region 5
Region 6 - \\Hssserver034\sanctionreviews
2. Open the negative review sheet for each specific worker to complete the review.
3. Select cases for review from ad hoc report posted to the C-IV Resource Center. Use the "FS Apps Denied Less Than 30 Days" and "Denial" ad hoc reports for intake denials or the "Discontinuance" report for continuing discontinued reviews.
4. Enter information in the yellow highlighted sections on the "worker monthly total" worksheet: worker name, file number, supervisor.
5. Complete one review sheet per review. Enter the yellow highlighted section on the review sheet: case name, case number, denial/disc date, reviewer name.
6. The first question is a "show-stopper". If answered "no", end the review.
7. Answer all review questions, annotating in comments the information to support a "no" response.
8. When a question is answered "no", the correction due date will automatically populate allowing 10-days for correction.
9. Reviews should be limited to the scope of the questions. If a note is cited, check the "note" box to the left of the comments field to establish a due date for correction.
10. Print 1-copy for the EW/ES, 1-copy for the supervisor and 1-copy for the CAS.
11. Supervisors will control for case corrections.

Analysis

CAS group will provide a monthly error trend analysis with corrective action recommendations.

Individual and district review findings should be discussed and appropriate corrective action developed at district corrective action meetings.

Food Stamps - Denial/Discontinuance Focus Review

Worker Name: 0 Review Date:
 File Number: 0 Sup Name: 0
 Case Name: Case Number:
 Denial/Disc Date: Reviewer Name:

Question #	Question	Y	N	NA
1	Was the application evaluated for ES?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	Does the case record substantiate the reason for the Denial or Discontinuance action? If NO, select the reason from the drop down box 2a to explain what was missing.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2a				
3	If Denial/Discontinuance was the correct action for the case, was the action taken timely?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	If Denial/Discontinuance was due to a missed appointment, was the Customer Schedule in C-IV used to confirm an appointment had been set, missed, and the DFA 386 NOMI was sent?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	Was the case appropriately transferred to TFS?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments	
Note? <input type="checkbox"/>	

Correction Due:

Completed? ☐

	EW initials	EWS I initials
Corrections Made		
Date		

Review 1

(11)

SAN BERNARDINO COUNTY
HUMAN SERVICES SYSTEM
INTER - OFFICE MEMO



TO: FS EWSIs

DATE:

FROM:, CAS

CC: , DM
 , DM
 , DD
 , CAC

SUBJECT: Analysis of Top Three Questions in Error for the Food Stamps
Denial/Discontinuance Focus Reviews – month

The chart below is an overview of the total number of Food Stamps Denial/Discontinuance Focus Reviews that were completed for the District. Case reviews successfully rebutted are reflected in these figures.

# of Cases Reviewed	Total # of Cases in Error	Total # of Correct Cases

The purpose of this report is to analyze the top three questions in error for the Focus Denial/Disc Reviews.

#		# of Errors	# of Errors Successfully Rebutted	Actual # of Errors

Below are the findings for each question

Root Cause Analysis for Question :

Root Cause Analysis for Question :

Root Cause Analysis for Question :

Conclusion

Top 3 questions in error for the FS Denial/Discontinuance Reviews
District – month

Do You Know...

Food Stamp (FS) applications must be:

- Approved by the 30th day from the application date.
- Denied on or after the 30th day from the application date.

The 30th day count begins the day after the application date:

- The application date is day zero (0).
- Day one (1) is the day after the SAWS 1 is received in the local office.

Example: A FS household applies on 3/1. The household does not attend the interview appointment. The denial is completed on 3/31st, the 30th day after the application date.

If the 30 th day falls on...	Then...
A weekend or holiday	Deny the application the first working day <u>after</u> the weekend or holiday. Action <u>cannot</u> be taken prior to the 30 th day. Completing the denial before the 30 th day may result in a FS Negative Error.
The EW's day off (9/80, vacation, sick day, etc.)	The EW's unit is responsible for completing the denial.

DO YOU KNOW...

FOOD STAMP NEGATIVE REVIEWS

In addition to Food Stamp QC reviews the State reviews denied and discontinued cases. These reviews are called Food Stamp Negative Reviews.

The State tolerance level for Negative Reviews is 8%. Counties who exceed the 8% tolerance level face potential financial sanctions/penalties and must take corrective action to lower their error rate.

San Bernardino County's Negative Review error rate is 15.1% for Federal Fiscal Year 2005/2006; which exceeds the tolerance level.

A formal corrective action plan is in the process of being submitted to the State.

Highlights of the plan include:

- An increase in the number of internal Negative Reviews will be completed
- Program material regarding FS denials will be re-released to staff
- Workflow tools, specifically 30th day calendars will be revised
- Denial and Discontinuance templates will be created for FS only cases.

Do You Know...

When denying a Food Stamp application because the household missed their scheduled interview, at intake or at Recertification, a DFA 386 - Notice of Missed Interview (NOMI) must be sent to the household.

The NOMI informs the household that they may contact the TAD office and request a second interview within 30 days of the application date.

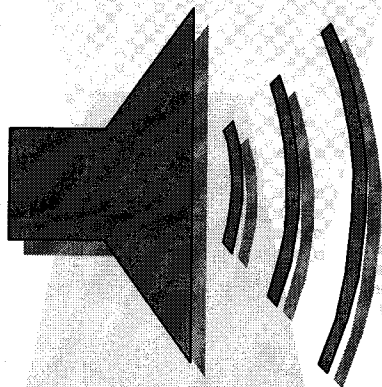
Failing to send the NOMI to the household invalidates the denial action.

For more information, see FSPHB, Chapter 1 – Application, page 1-11.

FLYER #06-135 ERRATA TAD (11/06) MC:lc

Do You Know...

When a customer fails to show for an interview/appointment (including scheduled telephone interviews), the Eligibility Worker (EW) must change the Customer Schedule to "No Show".



Not updating the Customer Schedule could lead to a Food Stamp Negative Error.

DO YOU KNOW

C4Yourself e-Applications are processed the same as applications made by the customer in the office, by phone, or mail.

Remember the following processing timeframes:

CalWORKs Immediate Need (IN): The IN interview must be conducted; payment issued or denied within one (1) workday from the date IN was requested. If the customer requested the Expedited Determination of Eligibility (EDE), provided all verifications; the full grant must be issued in three (3) days.

Food Stamps Expedited Services (ES)/Advanced Issuance (ADV): ES/ADV must be processed and benefits made available to the household no later than the third calendar day following the date the application was received.

CalWORKs/Food Stamps Processing Applications: Once all required verifications are received and eligibility is established, applications must be processed within 15 calendar days.

CalWORKs Applications: Actions to approve or deny the case must be done by the 30th day. If the customer fails to appear for the intake interview or provide requested verification, the application may be denied prior to the 30th day.

Food Stamp Applications: Must approve applications by the 30th day. If the customer fails to provide requested verifications the application cannot be denied prior to the 30th day.

Medi-Cal Applications: Actions to approve or deny the case must be done 45 days from the application date, or 90 days, if the eligibility is based upon a determination of disability or blindness. Special MC programs may have different processing timeframes. See the Medi-Cal Policy Handbook, for more information.

San Bernardino County C-IV Announcements 02/02/2009 – #09-007

Introduction

The Program Development Division (PDD) continues to issue C-IV Announcements as needed. Announcements are posted on the C-IV Resource Center site.

General

Release 9.01 deployed – Release 9.01 ran overnight on 02/01/2009. All changes scheduled for this Release and sent to staff via e-mail on Friday, 01/23/2009, have been implemented and any new instructions issued can be applied.

Eligibility Workers

1. **Automated mailing of the Food Stamp (FS) program NOMI and Denial NOA** – SCR #29204, which automates the mailing of the DFA 386 Notice of Missed Interview (NOMI) and the DFA 377.1A FS Discontinuance/Denial Notice of Action (NOA), was implemented in Release 9.01(deployed effective 02/02/2009). Effective with the release of this SCR, FS customers who miss a scheduled intake or recertification interview must be denied/discontinued using the **Negative Action reason = FS Missed Interview**. The following chart describes the process:

Stage	Description
1	The Eligibility Worker (EW) schedules the customer's interview using the Customer Schedule page in C-IV.
2	The customer misses the FS intake or recertification interview.
3	The EW: <ul style="list-style-type: none">• Denys/discontinues the customer's application using the Negative Action reason = FS Missed Interview.• Runs EDBC.• Saves the DFA 386 NOMI.
4	C-IV: <ul style="list-style-type: none">• Automatically generates the DFA 386 NOMI and mails it to the customer.• Suppresses the DFA 377.1A, Denial/Discontinuance NOA.
5	The customer does not contact the EW and the interview is not re-scheduled.
6	C-IV: <ul style="list-style-type: none">• Mails the DFA 377.1A, Denial/discontinuance NOA when all the following is true:<ul style="list-style-type: none">- The FS Program has a denied status with a Negative action reason = FS Missed Interview.- A DFA 386 NOMI letter has been sent to the customer,- The current date is the 30th day after the FS program application date. <p>Note: The date field is pre-populated with the Begin date from the Customer Appointment Detail page, if one is found. The field is editable and can be manually entered or updated.</p>



Journal Templates

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Welcome to the C-IV Online Journal Templates Website. This is a web-based repository of the C-IV Journal templates that allows staff to fill out the Journal Templates online and copy & paste the results into the C-IV Journal. Click the Question Mark below to read instructions on how to Copy & Paste.

Food Stamps Denial

TAD FS 126.3 Den

Please complete the form below then click submit to generate your Journal:

Does the applicant recipient have any special needs/disability?

+ If yes, click here to explain the special need and how we have accommodated it:

Interpreter/Bilingual County Employee used?

+ If yes, click here to explain who the interpreter was and how we have accommodated the client:

Food Stamps Denial

C-IV Generated, Negative Action, Opened in error (Select one):

Explain:

NOA on file:

FS denied on or after the 30th date?

E-mailed other program worker(s) with change information  Send email

If Yes, Worker Name:

Fill Out the form above completely before clicking Submit button. A Journal will be generated upon submission. Copy and Paste the Journal into the C-IV Journal.

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CalWORKs/Food Stamps Denial

TAD CW 126.4 Den

Please complete the form below then click submit to generate your Journal:


C-IV Generated: explain:

Negative Action: explain:

Open in error: explain:

NOA on file: (Y/N) Select

If no explain:

E-mailed other program worker(s) with change information N/A  Send email

If Yes, Worker Name:

Fill Out the form above completely before clicking Submit button. A Journal will be generated upon submission. Copy and Paste the Journal into the C-IV Journal.

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Food Stamps Discontinuance

TAD FS 126.4 Disc

Please complete the form below then click submit to generate your Journal:

Does the applicant recipient have any special needs/disability?

+ If yes, click here to explain the special need and how we have accommodated it:

Interpreter/Bilingual County Employee used?

+ If yes, click here to explain who the interpreter was and how we have accommodated the client:

Food Stamps Discontinuance

Discontinuance effective date:

Discontinuance reason:

Income Used:

MEDS Alerts Cleared:

NOA on file:

Additional information:

E-mailed other program worker(s) with change information

If Yes, Worker Name:

Fill Out the form above completely before clicking Submit button. A Journal will be generated upon submission. Copy and Paste the Journal into the C-IV Journal.

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Journal Templates

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CalWORKS/Food Stamps Discontinuance

TAD CW 126.7 Disc

Please complete the form below then click submit to generate your Journal:

Discontinuance effective date:

Discontinuance reason:

TFS eligible? Select

TFS HH Size

TFS Cert period

Income Used

MEDS Alerts Cleared

Transferred to Post Medical

Additional information:

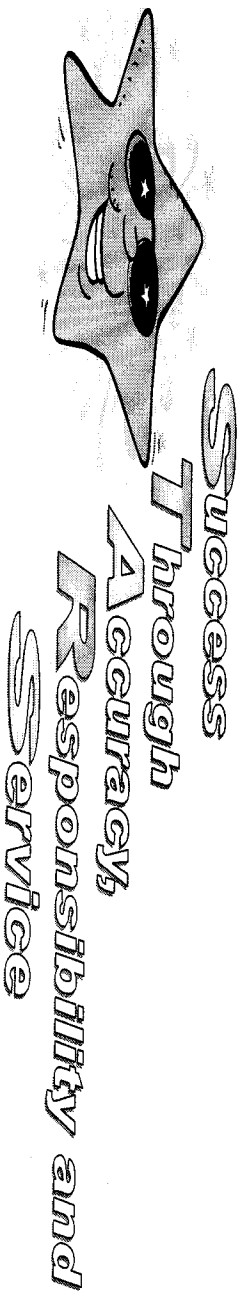
Is there a companion case associated with this program? Select

E-mailed other program worker(s) with change information N/A Send email

If Yes, Worker Name:

Fill Out the form above completely before clicking Submit button. A Journal will be generated upon submission. Copy and Paste the Journal into the C-IV Journal.

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REGION 5

Fontana

County WPR Stats for

Oct 2009

All Families: 42.86%

Two Parent: 34.52%

Cumulative Oct

All Families: 42.86%

Two Parent: 34.52%

Food Stamp Negative

County Error Rate

Sept 2009:

0.0%

Cumulative:

9.0%

District 9 Cumulative:

Reviewed 12 - 0 error

0%

Region 5 Cumulative:

Reviewed 12 - 1 error

5.9%

District WPR Stats for

10-09 thru 10-09

Fontana ESP

All Families -14.29%

Two Parent - 25.00%

Food Stamp Error - Nov 2009
is: 3.61 % Countywide

District 9 - 0.00%

Cumulative-10-09 thru 11-09

Countywide - 1.96%

Reviewed = \$ 18,726

Errors = \$ 367

District 9 - 0.0% Reviewed-\$ 677

Error \$ 0

Region 5-0.0% Reviewed - \$ 3,379

Error - \$ 0



Advance Eligibility Determination Process

Overview

Effective December 1, 2008 the Transitional Assistance Department (TAD) implemented the Advance Eligibility Determination (AED) process. This process involves reviewing the customer's SAWS 1 application, TAD 278 ID, and completing the AED 100 to determine:

- The need for an expedited appointment for applicants with Immediate Need (IN) or Expedited Services (ES) eligibility, and
 - Potential eligibility for programs.
-

Combination Medi-Cal/Non Assistance Food Stamp applications

Applications for Non Assistance Food Stamps (NAFS) are taken and processed by the MC/NAFS intake combo workers in addition to CalWORKs/Food Stamps (FS) intake workers. Medi-Cal (MC) applications are taken and processed by MC intake workers. The AED interviewer will be utilized to determine potential eligibility for the combination MC/NAFS applications.

Continued on next page

Advance Eligibility Determination Process, Continued

Advance Eligibility Determination procedure

Selected Intake Eligibility Workers (EWs) will be assigned to the duty of Advance Eligibility Determination (AED) Interviewer. The following table outlines the AED procedure:

Stage	Description
1	Customer applies for assistance.
2	Reception Office Assistant (OA) gives the customer a packet containing the following documents: <ul style="list-style-type: none"> • TAD 278 ID • SAWS 1 • TAD/WTW Program Checklist 101
3	Customer returns the completed paperwork to Reception OA.
4	<p>The Reception OA:</p> <ul style="list-style-type: none"> • Reviews the TAD 278 ID and SAWS 1 for completeness. • Researches the C-IV System to: <ul style="list-style-type: none"> – Ensure the customer does not currently have an open case (see C-IV System research block of this IIN). – Verify whether the customer received a Notice of Missed Interview (NOMI) and was subsequently denied for NOMI within thirty (30) days of the application date. <p>Note: If application/case was denied/discontinued for NOMI within thirty (30) days of the application date, the new application is assigned to the previous Eligibility Worker (EW).</p> <ul style="list-style-type: none"> • Date stamps each document received. • Places all the paperwork in the designated AED interviewer tray.
5	<p>AED Interviewer:</p> <ul style="list-style-type: none"> • Obtains completed paperwork from AED tray. • Reviews program eligibility information on the TAD 278 ID and the SAWS 1 (see Program eligibility information block). • Interviews the applicant customer and completes the AED 100 (see Eligibility determination block). • Schedules a return appointment and notates the appointment date and time on the TAD 127. • Attaches a copy of the TAD 127, to the TAD 278 ID (or application packet). <p>Note: If the customer is applying for both MC and NAFS, the AED interview is for NAFS purposes only. The customer has the option of completing the MC application by mail or at the same time as the NAFS application.</p>
6	<p>Intake/Pending OA:</p> <ul style="list-style-type: none"> • Completes MEDS research. • Pends the application and enters the customer's appointment into the Customer Schedule Detail page in C-IV. • Forwards the TAD 278 ID, SAWS 1, TAD/WTW Program Checklist 101, AED 100 and MEDS print-outs to the assigned Intake EW. <p>Note: Joint MC and NAFS applications must be assigned to a MC/NAFS worker for best customer service.</p>

Continued on next page

Advance Eligibility Determination Process, Continued

C-IV System research

The reception OA will research C-IV to verify applicant customer does not currently have an open case.

If the applicant customer...	Then...								
Has an open CalWORKs and /or Food Stamp case,	<ul style="list-style-type: none"> Refer the customer to the assigned Eligibility Worker (EW), even if the case is to be discontinued at a future date. Give the customer a "How Can We Help" card (TAD 20 E/S) and write in the spaces provided on the card the customer's: <ul style="list-style-type: none"> Case number EW name and number Employment Services Specialist (ESS) name and number. 								
Does not have an open CalWORKs case,	<ul style="list-style-type: none"> Place the paperwork in the AED tray. Ask customer to wait to be seen by AED interviewer. 								
Has an open Transitional Food Stamps (TFS) case and is applying for FS and/or CW,	<ul style="list-style-type: none"> Give the customer the required forms and when completed and returned to reception, place all the paperwork in the designated AED interviewer tray. 								
Does not have an open Food Stamp case,	<ul style="list-style-type: none"> Expand the Food Stamp program on the Case Summary page. Review the denial/discontinuance date and denial/discontinuance reason. <table border="1"> <thead> <tr> <th>If the denial/discontinuance date is...</th><th>Then...</th></tr> </thead> <tbody> <tr> <td>Less than thirty days from the application date and denied or discontinued for a missed interview,</td><td>Refer customer to the previously assigned EW and complete journal entry.</td></tr> <tr> <td>Less than thirty days from the application date and denied/discontinued for reason other than missed interview,</td><td>Have customer complete new application.</td></tr> <tr> <td>More than thirty days from the application date,</td><td>Have customer complete new application.</td></tr> </tbody> </table> <ul style="list-style-type: none"> Place the paperwork in the AED tray. Ask customer to wait to be seen by AED interviewer. 	If the denial/discontinuance date is...	Then...	Less than thirty days from the application date and denied or discontinued for a missed interview,	Refer customer to the previously assigned EW and complete journal entry.	Less than thirty days from the application date and denied/discontinued for reason other than missed interview,	Have customer complete new application.	More than thirty days from the application date,	Have customer complete new application.
If the denial/discontinuance date is...	Then...								
Less than thirty days from the application date and denied or discontinued for a missed interview,	Refer customer to the previously assigned EW and complete journal entry.								
Less than thirty days from the application date and denied/discontinued for reason other than missed interview,	Have customer complete new application.								
More than thirty days from the application date,	Have customer complete new application.								

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Advance Eligibility Determination Process, Continued

Program eligibility information

The AED interviewer will utilize the AED 99 – Advance Eligibility Determination Reference Tool - and review the following forms and specific questions to determine potential program eligibility.

Form	Question(s)	Program Eligibility Information
TAD 278 ID	N/A	Single individuals without children applying for CalWORKs only.
SAWS 1	14, 15	Reported resources/income do not exceed limits for the family size.
AED 100		Income and Resource information.

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Advance Eligibility Determination Process, Continued

Eligibility determination

After interviewing the applicant customer, the AED interviewer will determine if potential program eligibility exists.

If potential eligibility...	Then the AED interviewer will...
Exists for CalWORKs/FS	<ul style="list-style-type: none"> Schedule the customer for a return appointment with a Intake EW. Complete the TAD 127 and give it to the customer. Initial the TAD 278 ID (to identify who interviewed the customer). Forward the completed TAD 278 ID, SAWS 1, TAD/WTW Program Checklist 101, AED 100 and a copy of the TAD 127 to the Intake/Pending OA to pend application and enter the customer's appointment into the Customer Schedule Detail page in C-IV. <p>Note: If customer is eligible to IN/ES, the customer will be scheduled for a return appointment no later than the next work day.</p>
Does not exist,	<ul style="list-style-type: none"> Verbally inform the customer he/she is not eligible. Forward application to the Intake/Pending OA for research and pending prior to completing the denial process. Process denial within appropriate timeframes, entering appropriate information in C-IV to ensure the correct denial NOA is generated. Journal case action/information in C-IV. <p>Note: If denial action is for:</p> <ul style="list-style-type: none"> CalWORKs or CalWORKs/Food Stamp application – C-IV completes an auto-test and opens a pending Medi-Cal program; the Medi-Cal application is then assigned to a Medi-Cal Intake EW. Non Assistance Food Stamp (NAFS) application – No Medi-Cal action to be taken and no further action is required. NAFS/Medi-Cal application with NAFS denial – Medi-Cal application is handled separately.

Intake EW responsibilities

If eligibility exists, the Intake EW will do the following:

Step	Action
1	Review SAWS 1, MEDS and C-IV research and AED 100 received from the Intake/Pending OA.
2	Conduct face-to-face interview with customer.
3	Complete root questions and Detail pages in C-IV and process application according to established guidelines.

Note: The AED 100 will not be imaged into C-IV.

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Advance Eligibility Determination Process, Continued

Monitoring of procedure

The Eligibility Worker Supervisor I (EWSI) will monitor the AED process by:

- Randomly checking wait times for AED interviews.
- Reviewing workload inventories on a weekly basis to ensure denials are completed correctly.

EWSI and District Managers (DMs) will monitor the Intake board to ensure appointments are being kept within the mandated timeframes.

Application Interview

Definition

The application interview is an official and confidential discussion of the HH's circumstances, which directly relates to the determination of eligibility and issuance.

Purpose

The purpose of the interview is to review the household's application and Statement of Facts, clarifying, noting, and resolving changes and discrepancies.

Statement of Facts

The SAWS 2 or DFA 285 A2 Statement of Facts is required:

- For all Food Stamps and joint CalWORKs/Food Stamp applications, unless a C4Yourself application has been submitted.
 - To support the application for aid.
-

Process for obtaining the Statement of Facts (SAWS 2 or DFA 285 A2)

The process for obtaining the SAWS 2 or DFA 285 A2 is as follows. The SAWS 2/DFA 285 A2 is:

- Completed by the EW and the customer or Authorize Representative (AR), in C-IV (Non-financial and Financial Root Questions). If the customer is physically or mentally unable to complete the SAWS 2/DFA 285 A1, the EW can assist the customer.
- Reviewed with the customer by the EW. When an error or incorrect answer is discovered, the EW will make the corrections in C-IV, reprint the SAWS 2 and have the customer sign the corrected SAWS 2 certification/signature page. The customer is given the SAWS 2 and a **copy** of the certification/signature page. The original certification/signature page is sent to imaging.
- Signed by the customer or AR in the presence of the EW.

Note: The SAWS 2 will **not** be imaged into C-IV.

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CalWORKs/Food Stamps AED Worksheet

Customer's Name: _____		AED EW: _____		Date: _____	
Section 1: General Information					
Household Information					
Food Stamp household size: _____			CalWORKs AU size: _____		
Any one pregnant? Yes <input type="checkbox"/> No <input type="checkbox"/>			If yes, EDC date: _____		
All US citizens or legal non-citizens Yes <input type="checkbox"/> No <input type="checkbox"/>			If no, explain: _____		
Currently receiving aid? Yes <input type="checkbox"/> No <input type="checkbox"/>			If yes, where? _____		
Anyone age 18 and older a student? Yes <input type="checkbox"/> No <input type="checkbox"/>			If Yes, employed? Yes <input type="checkbox"/> No <input type="checkbox"/>		
			If Yes, hours worked per week: _____		
Income Information					
Check all that apply and enter amounts					
<input type="checkbox"/> Earnings \$ _____		<input type="checkbox"/> UIB \$ _____		<input type="checkbox"/> DIB \$ _____	
<input type="checkbox"/> SS \$ _____		<input type="checkbox"/> Child/spousal support received \$ _____		<input type="checkbox"/> VA \$ _____	
				<input type="checkbox"/> Other \$ _____	
Shelter Information			Resource Information		
Pay rent/mortgage? Yes <input type="checkbox"/> No <input type="checkbox"/>			Checking account? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Pay for utilities? Yes <input type="checkbox"/> No <input type="checkbox"/>			Savings account? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Purchase and prepare separately? Yes <input type="checkbox"/> No <input type="checkbox"/>			Other (list what and amounts) _____		
Section 2: Immediate Need (IN)					
CalWORKs applicants apply for IN by completing SAWS 1 Questions 14-18. If any item in Question 18 is checked "yes," schedule an appointment within one working day of the request. Document the IN status on the SAWS 1 County Use Only section.					
Section 3: Expedited Services (ES)					
Inform Foods Stamps applicants of the potential to receive ES and if criteria are met, ES benefits are issued within three days of the application date. Document ES status on the SAWS 1 County Use Only section.					
Step	Action				
1	Review the SAWS 1 to see if Questions 14-17 have been answered.				
	If the customer...	Then...			
	Answered questions 14-17,	Go to step 2.			
	Answered some of questions 14-17,	Explain to the customer they may be eligible for ES, if they answer all questions Did he/she choose to answer all of the questions (14-17)? • If Yes , go to step 2. • If No , go to step 2.			
	Did not answer any of the ES questions,	Explain to the customer they may be eligible for ES. If they answer all questions Did he/she choose to answer all of the questions (14-17)? • If Yes , go to step 2. • If No , check the box "ES questions not completed" in the County Use section. Do not schedule an ES appointment.			
2	Review Questions 14-17 for possible ES appointment.				
	If the amounts in Question(s)...	Then...			
	14 is less than \$100, and The gross amounts in 15 are less than \$150 OR 16 and 17 are more than the total amounts in 14 and 15,	Refer the customer for an ES appointment.			
	14 is more than \$100, and The gross amounts in 15 are more than \$150, OR 16 and 17 are less than the total amounts in 14 and 15,				
If ES criteria are met, only three items are needed to issue ES: 1) Identification of head of household, 2) Social Security Number for head of household, and 3) SAWS 1.					
Section 4: Comments					

Advanced Eligibility Determination (AED) Reference Tool

Targeted Review The following information will be reviewed on the TAD 278 ID, SAWS 1 and AED 100:

Form	Question(s)	Program Eligibility Information
TAD 278 ID		Single individuals without children applying for CalWORKs only.
SAWS 1	14, 15	Reported resources/income do not exceed limits for the family size.
AED 100		Income and Resource information.

Process Overview The following will be used to determine the next step in the process.

If potential eligibility...	Then the AED interviewer will...
Exists,	<ul style="list-style-type: none"> Schedule the customer for a return appointment with an Intake EW. Complete the TAD 127 and give it to the customer.
Does not exist,	Verbally inform the customer he/she is not eligible.

Income Limits The following Charts will be used to determine financial eligibility.

CalWORKs MBSAC and MAP Amounts

Size	MBSAC	MAP
1	\$512	\$326
2	841	533
3	1042	661
4	1239	788
5	1413	897
6	1589	1007
7	1743	1104

Food Stamp Maximum Gross Monthly Income Amounts

Size	Maximum Gross Monthly Income	Elderly & Disabled
1	\$1174	\$1490
2	1579	2004
3	1984	2518
4	2389	3032
5	2794	3547
6	3200	4061
7	3605	4575

Resources

The CalWORKs and Food Stamp Resource limits are:

- \$3000 for households (HH) with disabled or elderly members.
- Waived for Non-Assistance Food Stamps (NAFS) Modified Categorical Eligibility (MCE).
- \$2000 for all other HH.

Reference

For complete instructions on the process, please refer to CalWORKs or Food Stamp Policy Handbooks.



Food Stamp Negative QC Report – 4th Quarter, FFY 2008/2009

Introduction

This report summarizes the Food Stamp Quality Control (QC) invalid actions for negative case reviews. The first two pages of this report contain cumulative information through the fourth quarter of federal fiscal year (FFY) 2008/2009. The remaining pages of this report contain information specific to the fourth quarter of FFY 2008/2009.

A negative action is one that was taken to deny a Food Stamp application, or terminate or suspend an active Food Stamp case.

Note: The California Department of Social Services (CDSS), Field of Operations Bureau (FOB) currently completes negative reviews.

FFY 2008/2009 cumulative negative information

Through 09/2009, the cumulative portion of this report contains overall and regional breakdowns of:

- Disposition of reviews
- Review findings,
- Error rate,
- Error Causes

Negative error rate

The negative Food Stamp QC error rate is established by the total number of invalid case reviews, compared to the total number of completed reviews through the fourth quarter of FFY 2008/2009. Unlike active FS reviews there are no specific dollar amounts for invalid action citations in negative reviews.

Action type	# Completed	# Invalid	Error rate
Denial	42	3	7.14%
Termination	25	3	12%

Disposition of reviews

CDSS/FOB staff completed 67 of 93 cases selected for review. Of the 67 completed negative QC cases, 6 for 8.96% were cited as invalid negative actions. The table below shows the disposition of reviews through the fourth quarter of FFY 2008/2009:

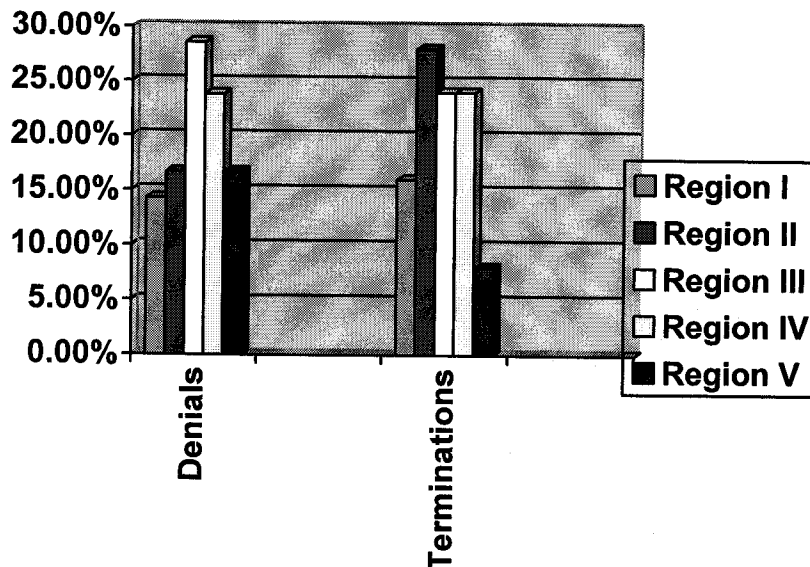
Disposition	Number	Percent of total sample
Completed	67	72.04%
Drop: not subject to review	26	27.96%
Total	93	100%

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Food Stamp Negative QC Report – 4th Quarter, FFY 2008/2009, Continued

Negative FS QC statistics by Region

The following graph and charts contain statistics broken down by region regarding negative FS QC reviews pulled for review through the fourth quarter of federal fiscal year 2008/2009. The percentage of negative actions pulled for each Region has been broken down by denials and terminations and displayed below.



Region	Denials reviewed	Percentage of total denials	Terminations reviewed	Percentage of total terminations
I	6	14.28%	4	16%
II	7	16.67%	7	28%
III	12	28.57%	6	24%
IV	10	23.81%	6	24%
V	7	16.67%	2	8%

Region	Denials found invalid	Percentage of total denial invalid actions	Terminations found invalid	Percentage of total termination invalid actions
I	0	0%	0	0%
II	0	0%	0	0%
III	2	66.67%	1	33%
IV	1	33.33%	1	33%
V	0	0%	1	33%

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Food Stamp Negative QC Report – 4th Quarter, FFY 2008/2009, Continued

Fourth quarter information

This portion of the report contains information specific to the fourth quarter of 2008/2009. The fourth quarter of FFY 2008/2009 resulted in the review of 10 denials and 8 terminations. No negative actions were cited as invalid for the fourth quarter.

Individual regional breakdown

The following pages contain individual breakdowns of FS negative review results for the fourth quarter of FFY 2008/2009.

Note: There are no dollar amounts associated with FS negative reviews. Percentages are based purely on number of completed reviews and number of invalid actions cited.

Region I

Region I consists of districts 01 and 02. Of the 18 total negative reviews for the fourth quarter of 2008/2009, Region I had 2 negative reviews completed and no invalid actions cited.

District	# Denials reviewed	# Invalid denials	Denial error rate	# Terminations reviewed	# Invalid terminations	Termination error rate
1	1	0	0%	1	0	0%
2	0	0	0%	0	0	0%
Region total	1	0	0%	1	0	0%

Region II

Region II consists of districts 15 and 25. Of the 18 total negative reviews for the fourth quarter of 2008/2009, Region II had 7 negative reviews completed and no invalid actions cited.

District	# Denials reviewed	# Invalid denials	Denial error rate	# Terminations reviewed	# Invalid terminations	Termination error rate
15	2	0	0%	2	0	0%
25	1	0	0%	2	0	0%
Region total	3	0	0%	4	0	0%

Continued on next page

Food Stamp Negative QC Report – 4th Quarter, FFY 2008/2009, Continued

Region III

Region III consists of districts 06, 08, 10, 18, 26, and 48. Of the 18 total negative reviews for the fourth quarter of 2008/2009, Region III had 3 negative reviews completed and no invalid actions cited.

District	# Denials reviewed	# Invalid denials	Denial error rate	# Terminations reviewed	# Invalid terminations	Termination error rate
06	0	0	0%	0	0	0%
08	1	0	0%	1	0	0%
10	0	0	0%	0	0	0%
18	1	0	0%	0	0	0%
26	0	0	0%	0	0	0%
48	0	0	0%	0	0	0%
Total	2	0	0%	0	0	0%

Region IV

Region IV consists of districts 03, 04, 07, and 79. Of the 18 total negative reviews for the fourth quarter of 2008/2009, Region IV had 3 negative reviews completed and no invalid actions cited.

District	# Denials reviewed	# Invalid denials	Denial error rate	# Terminations reviewed	# Invalid terminations	Termination error rate
03	0	0	0%	1	0	0%
04	2	0	0%	0	0	0%
07	0	0	0%	0	0	0%
49	0	0	0%	0	0	0%
Total	2	0	0%	1	0	0%

Region V

Region V consists of districts 09 and 19. Of the 18 total negative reviews for the fourth quarter of 2008/2009, Region V had 3 negative review completed and no invalid actions cited.

District	# Denials reviewed	# Invalid denials	Denial error rate	# Terminations reviewed	# Invalid terminations	Termination error rate
09	2	0	0%	1	0	0
19	0	0	0%	0	0	0%
Total	2	0	0%	1	0	0%

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Food Stamp Negative QC Report – 4th Quarter, FFY 2008/2009, Continued

Year end FS negative Summary

The information contained on this part of the report is a regional summary of all FS negative reviews and errors for FFY 2008/2009.

Region I FFY 2008/2009

Region I consists of districts 01 and 02. Negative review combined totals for Region I are 6 denials and 4 terminations reviewed for FFY 2008/2009. Region I had no invalid actions cited for this same federal fiscal year. The chart below shows a district breakdown of types of negative reviews completed for Region I.

District	# Denials reviewed	# Invalid denials	Denial error rate	# Terminations reviewed	# Invalid terminations	Termination error rate
01	6	0	0%	3	0	0%
02	0	0	0%	1	0	0%
Region total	6	0	0%	4	0	0%

Region II FFY 2008/2009

Region II consists of districts 15, 25, and 75. Negative reviews combined totals for Region II are 7 denials and 7 terminations reviewed for FFY 2008/2009. Region II had no invalid actions cited for this same federal fiscal year. The chart below shows a district breakdown of types of negative reviews completed for Region II.

District	# Denials reviewed	# Invalid denials	Denial error rate	# Terminations reviewed	# Invalid terminations	Termination error rate
15	5	0	0%	3	0	0%
25	2	0	0%	4	0	0%
75	0	0	0%	0	0	0%
Region total	7	0	0%	7	0	0%

Continued on next page

Food Stamp Negative QC Report – 4th Quarter, FFY 2008/2009, Continued

Region III FFY 2008/2009

Region II consists of districts 06, 08, 10, 18, 26, and 48. Negative reviews combined totals for Region III are 12 denials and 6 terminations reviewed for FFY 2008/2009. Region III had 3 invalid actions cited for this same federal fiscal year. The chart below shows a district breakdown of types of negative reviews, invalid actions cited, and error rates for Region III.

District	# Denials reviewed	# Invalid denials	Denial error rate	# Terminations reviewed	# Invalid terminations	Termination error rate
06	1	1	100%	0	0	0%
08	6	1	16.66%	2	1	50%
10	0	0	0%	0	0	0%
18	3	0	0%	0	0	0%
26	0	0	0%	2	0	0%
48	2	0	0%	2	0	0%
Region total	12	2	16.66%	6	1	16.66%

Region IV FFY 2008/2009

Region IV consists of districts 03, 04, 07, and 79. Negative reviews combined totals for Region IV are 10 denials and 6 terminations reviewed for FFY 2008/2009. Region IV had 2 invalid actions cited for this same federal fiscal year. The chart below shows a district breakdown of types of negative reviews, invalid actions cited, and error rates for Region IV.

District	# Denials reviewed	# Invalid denials	Denial error rate	# Terminations reviewed	# Invalid terminations	Termination error rate
03	1	0	0	1	0	0
04	5	0	0	0	0	0
07	4	1	25%	5	1	20%
79	0	0	0	0	0	0
Region total	10	1	10%	6	1	16.66%

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Food Stamp Negative QC Report – 4th Quarter, FFY 2008/2009, Continued

Region V FFY 2008/2009

Region V consists of districts 09 and 19. Negative reviews combined totals for Region V are 7 denials and 2 terminations reviewed for FFY 2008/2009. Region V had 1 invalid actions cited for this same federal fiscal year. The chart below shows a district breakdown of types of negative reviews, invalid actions cited, and error rates for Region V.

District	# Denials reviewed	# Invalid denials	Denial error rate	# Terminations reviewed	# Invalid terminations	Termination error rate
09	5	0	0	1	0	0%
19	2	0	0	1	1	100%
Region total	7	0	0%	2	1	16.66%

Year end invalid actions summary

The table below displays all invalid actions cited for FFY 2008/2009 along with a breakdown of element codes and nature codes cited as reason for invalid action.

Negative action type reviewed	# Invalid action citations	Element code and description	Nature code and description
Denial	1	150 – Household Composition	99 - Other
Denial	1	311 – Wages and Salaries	98 – Transcription or computation errors.
Denial	1	413 – Application	77 – Failed to issue a required Notice of Missed Interview (NOMI).
Termination	1	415 – Verification	80 – No application or case record information to support denial/termination/suspension.
Termination	2	416 – Action Type	72 – Improper termination or suspension for failure to meet reporting requirement.



Food Stamp Negative QC Report – 1st Quarter, FFY 2009/2010

Introduction

This report summarizes the Food Stamp Quality Control (QC) invalid actions for negative case reviews. The first two pages of this report contain cumulative information through the first quarter of federal fiscal year (FFY) 2009/2010. The remaining pages of this report contain information specific to the first quarter of FFY 2009/2010.

A negative action is one that was taken to deny a Food Stamp application, or terminate or suspend an active Food Stamp case.

Note: The California Department of Social Services (CDSS), Field of Operations Bureau (FOB) currently completes negative reviews.

FFY 2008/2009 cumulative negative information

Through 12/2009, the cumulative portion of this report contains overall and regional breakdowns of:

- Disposition of reviews
- Review findings,
- Error rate,
- Error Causes

Negative error rate

The negative Food Stamp QC error rate is established by the total number of invalid case reviews, compared to the total number of completed reviews for the first quarter of FFY 2009/2010. Unlike active FS reviews there are no specific dollar amounts for invalid action citations in negative reviews.

Action type	# Completed	# Invalid	Error rate
Denial	9	1	11.11%
Termination	8	1	12.5%

Disposition of reviews

CDSS/FOB staff completed 17 of 22 cases selected for review. For the first quarter of FFY 2009/2010, 2 invalid actions were cited for 11.76% negative error rate based on the total of 17 completed cases. The disposition of reviews during the first quarter of FFY 2009/2010 is shown in the table below:

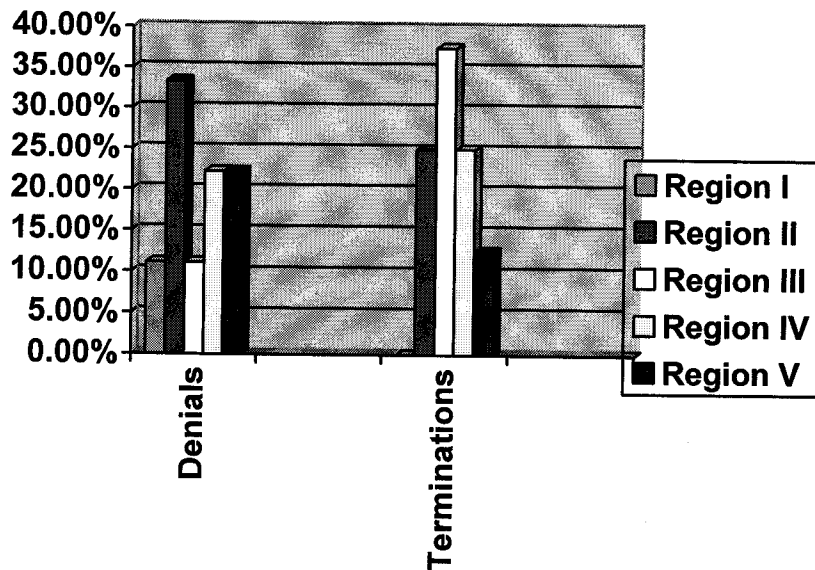
Disposition	Number	Percent of total sample
Completed	17	77.27%
Drop: not subject to review	5	22.73%
Total	22	100%

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Food Stamp Negative QC Report – 1st Quarter, FFY 2009/2010, Continued

Negative FS QC statistics by Region

The following graph and charts contain statistics broken down by region regarding negative FS QC reviews pulled for review through the first quarter of federal fiscal year 2009/2010. The percentage of negative actions pulled for each Region has been broken down by denials and terminations and displayed below.



Region	Denials reviewed	Percentage of total denials	Terminations reviewed	Percentage of total terminations
I	1	11.11%	0	0%
II	3	33.34%	2	25%
III	1	11.11%	3	37.5%
IV	2	22.22%	2	25%
V	2	22.22%	1	12.5%

Region	Denials found invalid	Percentage of total denial invalid actions	Terminations found invalid	Percentage of total termination invalid actions
I	0	0%	0	0%
II	0	0%	1	100%
III	0	0%	0	0%
IV	1	100%	0	0%
V	0	0%	0	0%

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Food Stamp Negative QC Report – 1st Quarter, FFY 2009/2010, Continued

First quarter information

This portion of the report contains information specific to the first quarter of 2009/2010. The element and nature codes for the 2 invalid actions cited for this quarter are shown below:

# Invalid action citations	Element code and description	Nature code and description
1 – Termination	413 Application	76 Failed to provide expedited service to expedited eligible household.
1 – Denial	415 Verification	80 No application or case record information to support denial / termination / suspension.

Individual regional breakdown

The following pages contain individual breakdowns of FS negative review results for the first quarter of FFY 2009/2010.

Note: There are no dollar amounts associated with FS negative reviews. Percentages are based purely on number of completed reviews and number of invalid actions cited.

Region I

Region I consists of districts 01 and 02. Of the 17 total negative reviews for the first quarter of 2009/2010, Region I had 1 negative review completed and no invalid action cited.

District	# Denials reviewed	# Invalid denials	Denial error rate	# Terminations reviewed	# Invalid terminations	Termination error rate
1	0	0	0%	0	0	0%
2	1	0	0%	0	0	0%
Region total	1	0	0%	0	0	0%

Continued on next page

Food Stamp Negative QC Report – 1st Quarter, FFY 2009/2010, Continued

Region II

Region II consists of districts 15, 25 and 75. Of the 17 total negative reviews for the first quarter of 2009/2010, Region II had 5 negative reviews completed and no invalid actions cited.

District	# Denials reviewed	# Invalid denials	Denial error rate	# Terminations reviewed	# Invalid terminations	Termination error rate
15	1	0	0%	1	0	0%
25	1	0	0%	1	0	0%
75	1	0	0%	0	0	0%
Region total	3	0	0%	2	0	0%

Region III

Region III consists of districts 06, 08, 10, 18, 26, and 48. Of the 17 total negative reviews for the first quarter of 2009/2010, Region III had 4 negative reviews completed and no invalid actions cited.

District	# Denials reviewed	# Invalid denials	Denial error rate	# Terminations reviewed	# Invalid terminations	Termination error rate
06	0	0	0%	0	0	0%
08	0	0	0%	1	0	0%
10	0	0	0%	0	0	0%
18	1	0	0%	0	0	0%
48	0	0	0%	2	0	0%
Total	1	0	0%	3	0	0%

Region IV

Region IV consists of districts 03, 04, 07, and 79. Of the 17 total negative reviews for the first quarter of 2009/2010, Region IV had 4 negative reviews completed and 1 invalid action cited for a 25% individual error rate. 1 Invalid denial was cited for element code 413 – Application (see page 3 of 5 for more information).

District	# Denials reviewed	# Invalid denials	Denial error rate	# Terminations reviewed	# Invalid terminations	Termination error rate
03	0	0	0%	0	0	0%
04	0	0	0%	1	0	0%
07	2	1	50%	1	0	0%
49	0	0	0%	0	0	0%
Total	2	1	50%	2	0	0%

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Food Stamp Negative QC Report – 1st Quarter, FFY 2009/2010, Continued

Region V

Region V consists of districts 09 and 19. Of the 17 total negative reviews for the first quarter of 2009/2010, Region V had 3 negative reviews completed and 1 invalid action cited for a 33.33% individual error rate. 1 Invalid termination was cited for element code 415 – Verification (see page 3 of 5 for more information).

District	# Denials reviewed	# Invalid denials	Denial error rate	# Terminations reviewed	# Invalid terminations	Termination error rate
09	0	0	0%	1	1	100
19	2	0	0%	0	0	0%
Total	2	0	0%	1	1	100%

County of San Bernardino – Food Stamp Negative Processes and Tools

**Contact
Information**

Please contact Debbie Curry at (909) 383-9670 or dcurry@hss.sbcounty.gov for additional information or questions regarding this packet and presentation.
